

ISSUE SLIP STAPLE AREA (for additional cross reference)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER			
FORMALITY REVIEW		10585	10 11-20-02
RESPONSE FORMALITY REVIEW			1/6

INDEX OF CLAIMS

+ _____ Rejected
 - _____ Allowed
 (Through summary) _____ Canvassed
 + _____ Restricted
 H _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy